AUG 3 0 2004 Please this box -> +

Filing

a valid OMB control number.

required)

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains

## Attorney Docket Number 1/1472 **DECLARATION FOR UTILITY OR** Joachim MIERAU First Named Inventor **DESIGN COMPLETE IF KNOWN** PATENT APPLICATION (37 CFR 1.63) 10 / 801,286 **Application Number** Filing Date 03/16/2004 □ Declaration ☑ Declaration OR Submitted Submitted after Initial Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial

**Examiner Name** 

As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  Pramipexole For The Reduction Of Excessive Food Intake For Children									
the specification of which (Title of the Invention)  is attached hereto OR									
was filed on (MM/DD/YYYY) 03/16/2004 as United States Application Number or PCT International									
Application Number 10/801,286 and was amended on (MM/DD/YYYY) (if applicable).									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
l acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country		Foreign Filing Date (MM/DD/YYYY)		Priority Not Claimed	Certified C YES	opy Attached? NO		
DE 103 12 809	Germa	ny	03/21/2003		0000	NO 00	0000		
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
		Filing Date 08/21/2003	e (MM/DD/YYYY)		Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.				

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (12-97)

us sign (+) inside this box 

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLAPATION Litility or Design Patent Application

<u> DEGE</u>		<u> </u>	- Othit	<u> </u>	DE:	<u> </u>	rate		וואא	Catil	<i>7</i> 11	
I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.												
U.S. F	arent Applic Nu	ation or	PCT Parent		Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)				
					•				(ii applicazio)			
Additional U.S.	or PCT internation	onal applica	ation numbers ar	e listed on	a supp	lemental	priority data	sheet PTO	/SB/02B	attached h	nereto.	
As a named inventor and Trademark Office	r, I hereby appoir se connected the	rewith:	ring registered pr Customer Num <i>OR</i> Registered prac	ber						II business Place Custe lumber Bar Label he	omer Code	
			Regist	ration		<b>J</b>	Nam				stration	
Robert P. Rayn	Name nond		25,089 Num	ber		Antho	ny P. Botti			Number 41,629		
Michael P. Mon			34,513		Susan K. Pocchiari					45,016		
Mary-Ellen M. (			27,928				I. Datlow			41,482		
Alan R. Stempe			28,991				A. Dow			46,124		
Timothy X. With		(a) =====d	140,232	Danistana	d Dessi	Andrea D. Small 54 859 Practitioner Information sheet PTO/SB/02C attached here						
			on supplemental	Registere	o Praci	itioner in	normation she	et PTO/SE	/UZC att	lached nere	eto.	
Direct all correspondence to:  Customer Number or Bar Code Label  28501  OR  Correspondence address below							ress below					
Name												
Address	ress											
Address					-		Ī	1				
City			-	-1	S	ate		ZIP				
Country			Telephon	ie				Fax				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.												
Name of Sole or First Inventor:								entor				
Given Name (first and middle [if any])				Family Name or Surname								
Joachim					MIERAU							
Inventor's Signature	toac	Joachin Misan								Date	08/02/04	
Residence: City	Mainz	Mainz State			c	Country Germany			Ci	tizenship	DE	
Post Office Addre	An den	Weiden	3				<del></del>	_				
Post Office Addre	88											
City	Mainz	State		ZIP		551	127	Countr	y G	ermany		
Additional inve	entors are being	g named o	on the _1_sup	plement	al Ado	litional li	nventor(s) s	heet(s) P	TO/SB/	/02A attac	ched hereto	



* No a consideration of the constant of the co		U.S. Pa	itent ar	nd Trademark Office; U.:	S. DEPARTME	PTO/SB/02A (08-03) 006. OMB 0651-0032 ENT OF COMMERCE		
Under the Paperwork Reduction Act of 1995, no persons are required.  DECLARATION	espond to a collection of information unless it contains a valid OMB control number ADDITIONAL INVENTOR(S) Supplemental Sheet Page of							
Name of Additional Joint Inventor, if any:	A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any)	Family Name or Surname							
Juergen	REESS							
Inventor's Juyen Cees	Date 08(04 / 0							
Residence: City Ulm	State		Cour	<sub>ntry</sub> Germany	Citizenship	DE		
Mailing Address Tokaierweg 46								
Mailing Address								
Ulm City			Zip 89075		Country Germany			
Name of Additional Joint Inventor, if any:     A petition has been filed for this unsigned inventor								
Given Name (first and middle (if any)	Family Name or Surname							
Marion	WIENRICH							
Inventor's Signature Farron William	Date July 23, 2004							
Residence: City Weiterstadt	State	Country Germany C			Citizenship DE			
Mailing Address Kreuzstrasse 57								
Mailing Address								
City Weiterstadt	State	State		<sub>Zip</sub> 64331	Country	Country Germany		
Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor								
Given Name (first and middle (if any)	Family Name or Surname							
Inventor's Signature		Date						
Residence: City	State			Country		Citizenship		
Mailing Address								
Mailing Address								
City	Zip		Zip	Country				

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Docket No. 1/1472